Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 09/420607 Effective October 1, 2000 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN TYPE [OR SMALL ENTITY (Column 2) (Column 1) RATE FEE FEE TOTAL CLAIMS 170 RATE BASIC PEE 710.00 MACIC FEE 355.00 NUMBER EXTRA OR MUTURER FILED FOR 2488 X\$18= X\$ 9= TOTAL CHARGEABLE CLAIMS) (minus 20= 176 10 minus 3 X40= X80= INDEPENDENT CLAIMS OR MULTIPLE DEPENDENT CLAIM PRESENT 270 +270= +135= OR " If the difference in column 1 is tess than zero, enter "0" in column 2 TOTAL 4528 TOTAL OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY SHALL ENTITY OR (Column 3) (Column 2) (Column 1) HIGHEST ADDI-ADDI-CLAUS PRESENT TIONAL RATE REMARING TIONAL RATE PREVIOUSLY EXTRA AFTER FEE FEE PAID FOR ENDMENT X\$18= 252 X\$ 9-OR Miras 200 Total 10 X40= X80= Independent OF FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +27Ò= +135= OR 252 OR ADDIT. FEE ADDIT FEE (Column 2) (Column 3) (Column 1) ADDI-HOREST ADDI-NUMBER PRESENT TIONAL REMAINING TIONAL RATE RATE PREVIOUSLY EXTRA AFTER FEE FEE PAID FOR MENTALENT X\$18= 200 X\$ 9= OR *10*0 Mirus Total X80= Minus -0 Independent X40-Ó OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR ADDIT. FEEL ADOIT. FEE (Column 2) (Column 3) 0 (Column 1) HIGHEST ADDI-ADDI-ALAUR PRESENT REMARKS RATE TIONAL TIONAL RATE PREVIOUSLY EXTRA AFTER FEE FEE PAID FOR ENDME X\$48= 200 16 300.00 X\$ 9= Minus OR •• Total Xee Minus ľĐ XÃÔ 200.00 Indep ndent 20 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

"If the entry in column 1 is less than the entry in column 2, write "If in column 2.

"If the "Righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

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I to a collection of information unless to displays 5 yield OMB commit number At Reduction Act of 1895 no oars Complete if Known Application Number 09/920,607 TRANSMIT Filing Date July 31, 2001 For FY 2005 Joremy Minshull, et al. First Named Inventor Examiner Name My Chau T. Tren Applicant claims small entity status. See 37 CFR 1 27 Art Unit 1639 TOTAL AMOUNT OF PAYMENT (5) 1,810.00 Attorney Docket No. 0178.210US METHOD OF PAYMENT (check all that apply) Credit Card Other tpicase identify: 50-0990 Maxygen, Inc. X Deposit Account Deposit Account Numb **Deposit Account Name** For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge tes(s) indicated below, except for the filing fee X Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) X Credit any overpayments X under 37 CFR 1.16 and 1.17

WARHING: Information on trus form stay become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2008. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** FILING FEES SEARCH FEES Small Entity Small Entity Small Entity Pos (\$) Pees Paid (E) Pen (\$) Fee (\$) Application Type Fee (5) Fee (S) Fee (S) **__500** Utility 300 150 250. 200 100 200 130 65 100 100 50 Design 160 Plant 200 100 300 150 80 600 300 150 500 250 300 Reissue **Provisional** 200 100 Ð 0 Small Engity 2. EXCESS CLAIM FEES Feq.(\$) 60 Fee Description 50 Each claim over 20 (including Reissues) 25 200 100 Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims Multiple Department Claims Total Claims Éxtra Claims Fee Paid (\$) Fee Paid (\$) Fee (S) - 20 or HP = HP = highest number of total claims paid for, if greater indep. Claims Extra Cigims Fac (\$) Fee Paid (5) 3 WHP . HP = highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
Total Sheets Rutte Sheets Number of each additional 50 or fraction thereof Foe Paid (\$) Total Sheets /50 = (round up to a whole number) x 4. OTHER FEE(6) Fees Paid (S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Three-Month Extension of Time and RCE" 1810.00 SUBMITTED BY Registration No. 38,459 Telephone (650) 298-5300 Signature arow DATO DELEMBER 9, 2005 Sharon M. Fujha Name (Print/Type Certificate of Facsimile Transmission under 37 C.F.R. §1.8

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